ment, as well as medical item consumption. Vision-related QoL was assessed with the NEI-VFQ-25 and local tolerance with the COMTOL. **RESULTS:** Thirteen thousand three hundred and fifty-two homes (66.7%) answered the mail. Five hundred eighty-one people declared they were treated for glaucoma, leading to glaucoma and ocular hypertension treatment prevalence of 1.8%, increasing with age. Of those with glaucoma, 173 patients under treatment at the time of the interview were selected at random. Their NEI-VFQ-25 global score was high showing an overall good QoL. Two domain scores showed some deterioration: general health and driving. COMTOL results identified 62.4% of the patients cited at least one local side effect: 25.4% had burning, 20.8% blurred vision and 20.2% tearing amongst others. Vision related QoL was affected by local side effects (up to 34.4%) leading to poor perceived treatment satisfaction that impacted compliance. Burning and stinging, dimming of vision, focusing from near to far and trouble seeing at night intensively affected QoL ($P < 0.001$) while redness, unusual taste and discharge from the eye did not reach the 0.10 P-Value. Dissatisfied patients visited their ophthalmologist more frequently leading to extra expenses. **CONCLUSION:** Based on a representative French sample, vision related QoL is affected by topical drug side effects that also impact patient satisfaction, compliance and cost.

PES19

INITIAL DEVELOPMENT AND VALIDATION OF THE EYE ALLERGY PATIENT IMPACT QUESTIONNAIRE (EAPIQ)

Buchholz P[1], Walt J[2], Wojcik A[2]
[1]Allergan, Ettlingen, Germany; [2]Allergan, Irvine, CA, USA

OBJECTIVE: To develop an instrument to assess the impact of ocular allergy symptoms. General health and allergy questionnaires do not adequately address the specific concerns of patients who suffer from chronic and/or seasonal ocular allergies and see ophthalmologists. **METHODS:** We modified an instrument, the Dry Eye Disease Impact Questionnaire (DEDIQ), to create the pretest version of the EAPIQ. Following pretesting with a small group of patients the EAPIQ was administered along with the MiniRQLQ, a rhinoconjunctivitis instrument developed by Juniper et al., in a randomized clinical trial studying a new ocular allergy treatment (300 US patients). To facilitate global use, we tested the EAPIQ with 48 allergy patients in 4 European countries, followed by focus groups to gain input on relevance of items and satisfaction with EAPIQ administration. **RESULTS:** Face validity was demonstrated in the initial pretest of the questionnaire. Modifications were made for use in the clinical trial. Many items (e.g. limitation reading and driving, days symptoms interfered with leisure activities) on the EAPIQ were found to correlate with patient reports of symptoms (itching) and the mRQLQ. European patients generally felt the EAPIQ addressed their concerns and suggested few changes to the questionnaire, including reducing the number of redundant items and standardizing the scaling options. The 48 participants had a mean age of 37 years and 52% were female. 78% reported use of allergy treatments 2–3 times daily. The most bothersome symptoms were itchy eyes (52%) and watery eyes (23%). Most patients felt irritable, embarrassed or self-conscious a "good-bit-of time" due to their eye allergy symptoms. **CONCLUSION:** The EAPIQ is a disease specific instrument that captures and addresses the symptomatic, outcomes, and QOL concerns of patients suffering from seasonal and chronic ocular allergy symptoms. A revised-final version of the EAPIQ is currently undergoing testing in a multinational validation study.

PES20

DERIVATION OF SYMPTOMS SCORES AND QOL SCORES FROM CLINICAL DATA IN SEASONAL ALLERGIC CONJUNCTIVITIS

Le Pen C[1], Smith AF[2], Lilliu H[1], Priol G[1], Berdeaux G[3]
[1]CLP-Santé, Paris, France; [2]Alcon Laboratories Ltd and Nuffield Laboratory of Ophthalmology, University of Oxford, Hemel Hempstead, Hertfordshire, United Kingdom; [3]Alcon, Rueil-Malmaison, France

OBJECTIVES: Using data from a prospective, randomized, double blind clinical trial comparing olopatadine to levocabastine in patients with Seasonal Allergic Conjunctivitis (SAC), two synthetic scores, summarizing recorded effectiveness information one being a single-dimensional symptoms score and the other a quality-of-life (QOL) measure were derived. We then compared the two measures in various national contexts. **METHODS:** Correspondence analysis was used to analyze the study results. Coordinates on the first factorial axis were transformed into an aggregate symptom score and averaged across patients at each visit. At the same time, 32 experts from 6 European countries were asked to quantify the impact of each level of each symptom on QOL from a patient's perspective. They were also asked to weigh on each symptom. An aggregated QOL score was thus derived and averaged across patients in both arms. **RESULTS:** At baseline, aggregated symptoms scores were identical across both groups of patients ($p = 0.798$). At day 42, the score in the olopatadine branch was significantly better than that in the levocabastine arm ($p = 0.032$). QOL life scores exhibited the same pattern of improvement. Comparisons between scores show that QOL score is positively, but not linearly, correlated to the symptom score. For high levels of symptom severity, a clinical improvement, measured in terms of a reduction of symptoms intensity, offers little QOL improvement, while the same improvement, starting from a lower level of symptom score, offers an important QOL improvement. **CONCLUSION:** The indicators constructed from the study data exhibit several interesting properties. Although they have strong clinical significance, they do not describe the

same phenomenon. The analysis allows a better understanding of how symptom improvements are reflected in patients' well-being. It also enables meaningful health economic analysis in situations using clinical data sources to be conducted.

PES21

IMPACT OF HYDROTHERAPY CARES ON THE QUALITY OF LIFE OF PATIENTS' SUFFERING FROM SKIN DISEASES

Taïeb C[1], Bouissou P[2], Nocera T[2], Verriere F[2], Martincic MA[2], Myon E[1]

[1]Pierre Fabre, Boulogne Billancourt, France; [2]Laboratoires Dermatologiques Avène, Lavaur, France

Skin diseases have a strong impact on the physical and mental well-being of the patient. It is clear that dermatological diseases affect not only the life of the children but also that of his/her family. **OBJECTIVES:** The Avène dermatological hydrotherapy center (DHC), welcomes over 2500 patients a year suffering from skin diseases. The objective of the study is to demonstrate the relevance of the long-term effects of hydrotherapy cares (HC) on patients' quality of life. **METHODS:** A generic scale (SF-12), a specific scale (DLQI—dermatology life quality index) and the consequences upon diurnal somnolence (Epworth scale) are completed by each patient at their arrival at the Avène DHC (inclusion), at the end of HC-three weeks- and at three and six months. The completed questionnaires were returned by post. **RESULTS:** In this first analysis, patients suffering from the three following conditions, psoriasis, atopic dermatitis and burns, were taken into account and analysed at inclusion and at the end of the HC. The DLQI score at inclusion is 31.5. At the end of HC, the DLQI score is 11.67. These first results show evidence of an improvement of patients' QoL after three weeks of HC ($p < 0{,}001$). Concerning the SF-12, the results consisted of two scores: mental (MCS-12) and physical (PCS-12). At inclusion the patients scores were: pcs-12 = 48 & mcs-12 = 35. At the end of HC, the scores were: PCS-12 = 47 & MCS-12 = 42. These results demonstrated a QoL improvement for the mental health dimension of the SF-12 ($p < 0.02$). For the pcs-12 the difference was not significant. There were no statistically significant change in patients' consequences upon diurnal somnolence at the end of the HC. **CONCLUSION:** These first results show evidence of an improvement of patients' QoL after three weeks of HC. It will really be relevant to try to confirm the timelessness of this QoL improvement at three and six months.

PES22

IMPACT OF CHILDREN'S SKIN DISEASES ON THEIR PARENTS' QUALITY OF LIFE

Taïeb C[1], Bouissou P[2], Nocera T[2], Verriere F[2], Martincic MA[2], Myon E[1]

[1]Pierre Fabre, Boulogne Billancourt, France; [2]Laboratoires Dermatologiques Avène, Lavaur, France

Skin diseases have a strong impact on the physical and mental well-being of the patient. This is confirmed by the large number of quality of life studies that exist. It is clear that dermatological diseases affect not only the life of the children but also that of his/her family. **OBJECTIVES:** The Avène Dermatological Hydrotherapy Center, which welcomes over 2500 patients a year, treats an increasing number of children. In most of case, at least one of the parents is present during the hydrotherapy treatments. For a better understanding of the repercussions of the skin disease, we also wanted to assess the quality of life of the parents. **METHOD:** A generic scale (SF12) and the consequences upon diurnal somnolence (Epworth scale) are completed by the accompanying parent, over a sufficiently long period of time and at regular intervals (Inclusion, 3 weeks -end of hydrotherapy cares-, 3 and 6 months). The completed questionnaires were returned by post. **RESULTS:** The results consisted of 2 scores: mental (MCS-12) and physical (PCS-12). The norm observed in a standard American population is 50 each dimension. At inclusion, the parents' scores were: PCS-12 = 53 and MCS-12 = 42, showing evidence of a low quality of life score in the mental health dimension compared to the standard American population. This parents' quality of life score can be compare to the adults patient's quality of life score assessed in similar condition. For example their mental health dimension score is equivalent to the mental health score of the spouses of patients suffering from benign prostatic hyperplasia. **CONCLUSION:** Those preliminary results show evidence of the impact on their children dermatologic disease on the parents' quality of life. Thus appropriate disease management and any treatment which help to reduce the dermatological symptoms of the children could improve their parents' quality of life.

PES23

PSORIASIS AND QUALITY OF LIFE SPANISH RESULTS

Finlay A[1], Del Molino J[2], Conesa A[3], Myon E[4], Taïeb C[4]

[1]University of Wales, Cardiff, United Kingdom; [2]Accion Psoriasis, Barcelona, Spain; [3]Pierre Fabre Iberica, Barcelona, Spain; [4]Programmes Pharmaco Economiques Pierre Fabre, Boulogne Billancourt, France

OBJECTIVE: To evaluate quality of life consequences for patients with psoriasis in Spain. **METHOD:** 6.000 anonymous questionnaires were sent, via a Psoriasis Patient Support Group (Acción Psoriasis). The questionnaires contained 2 scales: the Psoriasis Disability Index (PDI) plus 10 questions concerning treatment and evolution of the patients' psoriasis **RESULTS:** One thousand nine hundred questionnaires were returned (June 2002): response rate 42%. An analysis of the first 810 questionnaires was realised. The sex ratio Men (M)/Women (W) was: 49/51. Mean age: 42 years. Mean age of diagnosis: 21,8 years. The average to the total score was 8.47 (sd: 7.2 rank 0 to 39) i.e. 18.82 (sd: 17.2) when reported to